## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09765621

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20				Г	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE		OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			<i>D</i> minus 20=		*	0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*			X40=		OR	X80=	
ML	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								•		•	OTHER	THAN
		(Column 1)		(Colur		(Column 3)	) -	SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 30	Minus	** 0	20	=10		X\$ 9=		OR	X\$18=	100
	Independent	NTATION OF MI	Minus	*** <b>\</b>	CLAIM	= /	<b>↓</b> [	X40=		OR	X80=	900
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=	
							<b>∟</b>	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	Rag
(Column 1) (Column 2) (Column 3)												/ -
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> -</u>	<b>↓</b> ↾	X40=	·	OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		┚┞	+135=	i	OR	+270=	
							L	TOTAL		1	TOTAL	
	ADDIT. FEEOR ADDIT. FEE											
		(Column 1) CLAIMS		(Colur		(Column 3)	<u> </u>					
AMENDMENT C		REMAINING AFTER AMENDMENT	1 10	NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
4ME	Independent	*	Minus	***		=	1	X40=		OΒ	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								]	OR ,	TOTAL ADDIT. FEE	
		ber Previously Pai					er foun	d in the app	ropriate box	in col	umn 1.	